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Fi	II in this inf	ormation to iden	ntify your case	:		Check as	directed in lines	17 and 21:
	ebtor 1	Yeanette	A.	Smythe			the calculations requ	ired by this
		First Name	Middle Name	Last Name		Statement:	ble income is not det	ermined
	ebtor 2 pouse, if filing)	First Name	Middle Name	Last Name		under <u>1</u>	1 U.S.C. § 1325(b)(3)	-
Un	ited States Bar	nkruptcy Court for the	e: <u>EASTERN DIS</u>	T. OF PENNSYL	/ANIA		ble income is determ 1 U.S.C. § 1325(b)(3)	
Ca	ise number					3. The con	nmitment period is 3 y	/ears.
(if	known)					4. The con	nmitment period is 5 y	ears.
Off	icial Form	122C-1				Check if t	his is an amended fili	ng
		Statement of			ome			04/20
an	d Calcula	tion of Comm	itment Perio	<u>oa</u>				04/20
info	rmation applie	space is needed, at s. On the top of any culate Your Ave	y additional pages	s, write your name			which the additional n).	
1.	What is your	marital and filing sta	atus? Check one of	only.				
	Not marr	ried. Fill out Column	A, lines 2-11.					
	Married.	Fill out both Column	s A and B, lines 2-	11.				
	bankruptcy c August 31. If in the result. I	ase. 11 U.S.C. § 10 the amount of your m	1(10A). For example on the second sec	ple, if you are filing of ied during the 6 mon e than once. For exa	n Septembo ths, add the ample, if bot	er 15, the 6-mont income for all 6 th spouses own t	nonths before you fi th period would be Ma months and divide th he same rental prope space.	arch 1 through e total by 6. Fill
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	-	ages, salary, tips, b	onuses, overtime	, and commissions		\$1,155.55		
3.	Alimony and	maintenance payme	ents. Do not includ	de payments from a	spouse.	\$0.00		
4.	expenses of y regular contrib your dependen	rom any source whi you or your dependentions from an unma nts, parents, and roor ot include payments	ents, including ch rried partner, mem mmates. Do not in	ild support. Include bers of your househ clude payments fron	old,	\$0.00		
5.	Net income fr	om operating a bus	iness, profession	, or farm				
			Debtor 1	Debtor 2				
	Gross receipts deductions)	s (before all	\$0.00					
	Ordinary and r	necessary operating	\$0.00	-				
	expenses				Copy			

Deb	Yeanette A. Smythe				Case number (if k	nown)	
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
6.	Net income from rental and other	er real property					
	Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from rental or		Debtor 2	Copy	\$0.00		
	other real property						
7.	Interest, dividends, and royaltie	s			\$0.00		
8.	Unemployment compensation	ntand that the americat	wasaii rad waa a		\$0.00		
	Do not enter the amount if you con benefit under the Social Security						
	For you		\$0.	00			
	For your spouse						
	next sentence, do not include any allowance paid by the United State disability, combat-related injury or uniformed services. If you receive of title 10, then include that pay or amount of retired pay to which you under any provision of title 10 others.	es Government in con disability, or death of ed any retired pay paic nly to extent that it doe u would otherwise be e	nection with a a member of the I under chapter 61 s not exceed the entitled if retired				
10.	Income from all other sources in amount. Do not include any bene payments made under the Federa declared by the President under the (50 U.S.C. 1601 et seq.) with resp (COVID-19); payments received a humanity, or international or dome pay, annuity, or allowance paid by connection with a disability, comb member of the uniformed services separate page and put the total be	ifits received under the allaw relating to the na he National Emergence to the coronavirus as a victim of a war crirestic terrorism; or composite the United States Govat-related injury or disast. If necessary, list othe	e Social Security A tional emergency ies Act disease 2019 me, a crime agains pensation, pension vernment in ability, or death of	ct; st ı,			
	Total amounts from separate page	es, if any.				+	
11.	Calculate your total average mo Add lines 2 through 10 for each or Then add the total for Column A to	olumn.	В.		\$1,155.55	+	= \$1,155.55 Total average monthly income
P	art 2: Determine How to	Measure Your De	eductions fror	n Incom	e		
4.0						<u> </u>	¢4 455 55

12. Copy your total average monthly income from line 11. \$1,155.55

Deb	tor 1	Yeanette A. Smythe Case number (if known)	
13.	Calc	culate the marital adjustment. Check one:	
		You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below.	
14	Vou	Total	\$0.00 \$1,155.55
			Ψ1,100.00
15.		culate your current monthly income for the year. Follow these steps: Copy line 14 here	\$1,155.55
	100.	Multiply line 15a by 12 (the number of months in a year).	X 12
	15b.		\$13,866.60
16.		culate the median family income that applies to you. Follow these steps:	
		Fill in the state in which you live. Pennsylvania	
	16b.	Fill in the number of people in your household.	
	16c.	Fill in the median family income for your state and size of household	\$71,448.00
17.	How	do the lines compare?	
	17a.	Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, <i>Disposable income is runder</i> 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form	
	17b.	Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, <i>Disposable income is determined</i> 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C- On line 39 of that form, copy your current monthly income from line 14 above.	
Pa	art 3	Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)	
18.	Con	y your total average monthly income from line 11.	\$1,155.55
	Ded that	uct the marital adjustment if it applies. If you are married, your spouse is not filling with you, and you contend calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's me, copy the amount from line 13.	
	19a.	If the marital adjustment does not apply, fill in 0 on line 19a.	\$0.00
	19b.	Subtract line 19a from line 18.	\$1,155.55
20.	Calc	culate your current monthly income for the year. Follow these steps:	
	20a.	Copy line 19b	\$1,155.55
		Multiply by 12 (the number of months in a year).	X 12
	20b.	The result is your current monthly income for the year for this part of the form.	\$13,866.60
	20c.	Copy the median family income for your state and size of household from line 16c.	\$71,448.00

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	Yeanette A. Smythe	Case number (if known)
21. Ho	w do the lines compare?	
	Line 20b is less than line 20c. Unless otherwise or check box 3, <i>The commitment period is 3 years.</i>	rdered by the court, on the top of page 1 of this form, Go to Part 4.
	Line 20b is more than or equal to line 20c. Unless of this form, check box 4, <i>The commitment period</i> of	otherwise ordered by the court, on the top of page 1 is 5 years. Go to Part 4.
Part	4: Sign Below	
Ву	signing here, under penalty of perjury I declare that t	he information on this statement and in any attachments is true and correct.
·	signing here, under penalty of perjury I declare that t Is/ Yeanette A. Smythe	he information on this statement and in any attachments is true and correct. ${\bf X}$
·		he information on this statement and in any attachments is true and correct. X Signature of Debtor 2

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.